

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO. 30-02501741
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 15594
7. Lease Name or Unit Agreement Name  State BF
8. Well No. 2
9. Pool name or Wildcat SWD = Yates (96090)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3536 GR

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER SWD	
2. Name of Operator Stevens & Tull, Inc.	
3. Address of Operator P.O. Box 11005, Midland, TX 79702	
4. Well Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>16</u> Township <u>20S</u> Range <u>33E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3536 GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Repair Packer Leak <input checked="" type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1/29/97 - Pumper noticed pressure on casing/tubing annulus

1/30/97 - MIRU pulling unit - pull additional tension on packer and test annules - slow leak - POH with 20 joints of tubing and retest packer - held ok - RIH with 20 joints as before - tested ok.

1/31/97 - Bad packer seat - leaking again this a.m. - POH with 6 joints tubing - packer setting depth at 2800'. Tested annulus - held ok.

2/5/97 - NMOC D witness MIT - pressured backside to 500 psi Held ok - NMOC D representative took chart to Hobbs office.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Michael G. Mooney TITLE Consulting Engineer DATE 2/28/97  
TYPE OR PRINT NAME Michael G. Mooney TELEPHONE NO. 915/699-1410

(This space for State Use)

APPROVED BY DISTRICT SUPERVISOR TITLE DISTRICT SUPERVISOR DATE MAR 17 1997  
CONDITIONS OF APPROVAL, IF ANY:

